PTO/SB/22 (12-04) Approved for use through 7/31/2008, OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection information unless if displays a valid OMB control number. PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) Docket Number (Optional) **FY 2005** 500862001810 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) **Application Number** 10/758,774 Filed January 12, 2004 PULMONARY DELIVERY FOR BIOCONJUGATION Art Unit 1616 Examiner E. J. WEBMAN This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Small Entity Fee <u>Fee</u> One month (37 CFR 1.17(a)(1)) \$120 \$60 60.00 Two months (37 CFR 1.17(a)(2)) \$450 \$225 Three months (37 CFR 1.17(a)(3)) \$1020 8 \$510 Four months (37 CFR 1.17(a)(4)) \$1590 \$795 Five months (37 CFR 1.17(a)(5)) \$2160 \$1080 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952 theve enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate. I am the applicant/Inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.78(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number attomey or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 idaolZWa April 14, 2008 Signature Date Michael R. Ward (415) 268-6237 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or sesignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, acc below. Total of forms are submitted. I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, fax no. 571-273-8300, on the date shown below. Dated: April 14, 2008 Signature: (Laura Tsang)

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PTO/SB/17 (01-05)

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Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete If Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/756,774 FEE TRANSMITTAL January 12, 2004 Filing Date For FY 2006 First Named Inventor Alan M. EZRIN Examiner Name E. J. WEBMAN Applicant claims small entity status. See 37 CFR 1.27 1616 TOTAL AMOUNT OF PAYMENT 500862001810 60.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order Other (please identify): X Deposit Account Deposit Account Number 03-1952 Deposit Account Nam Morrison & Foerster LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) x Charge fee(s) Indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 X Credit any overpayments FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity Small Entity Small Entity Application Type Fee (\$) Fee (\$) Eee (\$) Fees Paid (\$) Fee (\$) Eco.(S) Fee (\$) Utility 300 150 500 250 200 100 200 100 100 Design 50 130 65 Plant 200 100 300 150 160 80 150 Reissue 300 500 250 600 300 200 Provisional 100 a n 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 Extra Claims Total Claims Fec Paid (\$) <u>Multiple Dependent Claims</u> Fee (\$) O x 25.00 0.00 Fee Paid (\$) Fee (\$) HP = highest numer of total claims paid for, if greater than 20, 180.00 0.00 indep. Claims Extra Claims Fee (\$) Fee Paid (\$) · 6 0 **= 100.00** 0.00 · 6 = HP = highest numer of Independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 shorts of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thoroof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or traction thereof Fee Paid (8) Ess.(S) -100 = *1*50 (round up to a whole number) x 4 OTHER FEE(S) Fees Paid (\$) Non-English Specification. \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1251 Extension for response within first month 60.00 SUBMITTED BY Registration No. (Attorney/Agent) Signature mi wael Ewen! 38,651 Telephona (415) 268-6237 Michael R. Ward Name (Print/Type) Date April 14, 2006

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	I hereby certify that this con	respondence is being facsimile transmit	itled to the Patent and Trademark Office, fex no. 571-273-8300, on
	the date shown below.	,	1
	Dated: April 14, 2006	Signature: 1-aW	(Laura Tsang)

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